Candidate's Name (print)

State Senate Office

District (if applicable)

Expenses Categories

CATEGORIES	CODE	TOTALS
Office expenses	A	161.32
Expenses related to volunteers	В	
Expenses related to travel	С	
Expenses related to advertising	D	987.45
Expenses related to paid staff	E	
Expenses related to consultants	F	
Expenses related to polling	G	
Expenses related to special events	Н	
Goods and services provided in kind for which money would otherwise have been paid	I	,
Other miscellaneous expenses	J	

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Tino Mendoza	State Senate	₽	
Candidate's Name (print)	Office	District (if applicable)	

Contributions of \$100 or Less

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION		DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
05-28-00	5.00			
07-10-00	40.00			
07-14-00	25.00		- 	
08-10-00	10.00			
08-18-00	25.00			
08-15-00	10.00			
No	thing follo	WS		

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-Tino Mondoza	State Senate	<u>z</u>
Candidate's Name (print)	Office	District (if applicable)

Expenses of \$100 or Less

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY
05-01-00	100.00	A
07-03-00	33.00	A
07-05-00	26.17	A
07-13-00	0.80	А
07-24.00	1:44	A
08-01-00	987.45	D
Nothing	50 HOWS	
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DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY
EXPENSE	EXPENSE	
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Tino Mendoza	State Senate	군
candidate's Name (print)	Office	District (if applicable)

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON. GROUP OR ORGANIZATION WHO	CATEGORY	DATE(S) OF EACH	AMOUNT(S) OF
RECEIVED THE PAYMENT FOR THE EXPENSE(S)			EACH EXPENSE
L.V. R/J 1111 W. BonanzaRd L.V., NV 89106	D	08-01-00	987.45
Nothing	So (/2	16)5	

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-Tino Mendoza	State	Senate	7	
andidate's Name (print)	-	Office	District (if applicable)	

Contributions in Excess of \$100 or, When Added Together Exceed of \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	CHECK ✓ IF LOAN	CHECK ✓ IF IN KIND
None =				
a. <u></u>				